## HPF SUBGRANTEE PROGRESS REPORT State Form 50866 (R4 / 4-06)



## SUBGRANTEE PROGRESS REPORT

**HPF** 

Subgrantee:	Grant Number	:
Project Name:	Period Covere	d:
Please answer all pertinent questions as accurated and sign the form. Mail or FAX this form sedeadlines printed below. <b>COMPLETION OF</b>	o the DHPA Grants Staff will rec ALL FIELDS IS MANDATORY	ceive it no later than the reporting
Estimated total project funds expended: Estimated total grant funds expended: Estimated % of work completed:	During This Reporting Period:	Total To Date:
Estimated amount of grant funding to be used: Estimated amount of grant funding that will be Date when draft product will be submitted for I		
The grant project is: [ ] on schedule [ ]	30 or less days behind schedule (explanation required below)	[ ] over 30 days behind schedule (explanation required below)
In the space below or on a separate sheet, preporting period.	please give a detailed summary of	of all work completed during thi
In the space below or on a separate sheet, list a situations that might affect the scope of work, please provide a detailed explanation.		
Signature Agent of Sponsoring Orga	anization Date	